J. S. COS	ST REIMBURS						_ [DA.	ID BY	
(Department, bureau, or establishment)								SAPC 8364 COPY / OF 3		
Voucher prepared at							SA			
THE UNITED STATES, Dr., Payee's Account No. 1247							со			
r _o							-			_
V 048880#888##		((Payee)				-		⊎ ^y ′	
	(Add	ress)	(Oity)		(State)		_			
No. and Date of Order	Date of Delivery	A (Enter description, schedule, and	RTICLES OR SERVIC item number of contra other information dee	CICLES OR SERVICES om number of contract or Federal suppler information deemed necessary)		QUANTITY	UNIT PRICE		AMOUNT	
activity with the state of the	-	Discount Terms					Cost	Per	Dollars	Cts.
		Costs				·			9,265	29
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Complete Partial										
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Use continuation sheet(s) if necessary ipped from to Weight Government B/L No.								Total	\$ 9,265	29
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TOTHR .		(Sign original only)			Differen	ces				
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entract No. 🛕	101 (Date	Req. No.		D	ate	J.	voice Rec'	d.	
rsuant to autho	rity vested in me. I	certify that this account	t is correct and proper f	for payment.						
Approve				†					·	
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tle	THE REVERSE OF THE	S FORM MUST BE EXECUTED 1	WHEN PURCHASES ARE MADE	OR SERVICES SEC	CURED WITHO	UT WRITTEN AC	GREEMENT II	N ANY FORM		
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Approved For Release 2000/04/12 : CIA-RDP64-00360R000400110080-8 STATOTHR